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STRATEGY RESEARCH PROJECT

ENHANCING THE WELLNESS OF RESERVE FORCES: A STRATEGIC CHALLENGE

BY

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by

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ABSTRACT

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The purpose of this paper is to provide a strategy to Reserve Commanders in maintaining a healthy force in support of Joint Vision 2010/2020 through Force Health Protection life-cycle health maintenance program and the Department of Defense HOOAH4HEALTH promotion program. Wellness is the integration of body, mind, and spirit to produce a balanced lifestyle by practicing good health habits and eliminating harmful ones. Disease non-battle injuries can effect and have an impact on the sustained readiness of our troops. The Army Reserve has become a relevant force, focused on readiness and committed to meeting the challenges of the 21st Century. America's Army Reservist needs not only to be trained but healthy, enabling victory in peace and war.

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ENHANCING THE WELLNESS OF RESERVE FORCES: A STRATEGIC CHALLENGE

Health promotion is a balance of awareness, education, motivation, and integration activities (physical, emotional, spiritual, intellectual, and social) designed to facilitate behavior and environmental alterations in lifestyle that will optimize health and total fitness or prevent disease or injury. It includes those activities intended to support and influence individuals to manage their own health through self-care, health maintenance, and avoidance of modifiable disease and injury risks. Operationally, health promotion and disease prevention encompasses clinical preventative services, and lifestyle issues of tobacco prevention and cessation, physical fitness, nutrition, stress management, alcohol and drug abuse prevention, communicable and chronic disease prevention (including cancer and cardiovascular disease prevention), and other efforts to reduce preventable illness and injuries.¹

—DOD Directive 1010.10

Health promotion has been advocated by the military through Army Regulation 600-63 since 1987. The goal of the Army health promotion program (Fit to win) is to maximize readiness, combat efficiency, and work performance. Operationally, health promotion is implemented at the installation level through a health promotion program. Army Reservist's are located in 1,100 Reserve centers in towns and cities across America, very few are located near a military installation to take advantage of the health promotion program. If they were located near a military installation, they would not be eligible for the health program, because Reservists are only authorized military medical assistance in the line of duty. The challenge for the reserve system is to provide a health promotion program to soldiers who train one weekend a month and two weeks a year. The unit's training schedule is filled to capacity with mandatory classes, training and administrative "must do's". The reserve system has the same requirements as their active duty counterpart. They have thirty-nine days to complete fifty-seven days of administrative work and does not include the requirement to complete individual or collective training expected.

Reserve Components are being relied upon to support the increased numbers of deployments and in meeting the operational requirements, the fitness of our forces are more important than ever. A healthy soldier is a mission ready soldier. Optimal health results in optimal results. Health promotion and wellness is an essential facet of strategic planning in any military organization. Because deployment may occur at any time maintenance of optimal health is essential for military readiness. America's Army Reservist needs not only to be trained but healthy, enabling victory in peace and war.

Wellness is the integration of body, mind and spirit to produce a balanced lifestyle by practicing good health habits and eliminating harmful ones. Disease non-battle injuries can

participate in the HOOAH Challenge interactive web-site and request to CHPPM an outcome evaluation, with baseline health risk assessment of the unit. This information can be used to concentrate efforts on any unhealthy risks that may impact on health readiness. It is an individual responsibility to maintain one's health, and this strategy will help the individual and the commander achieve positive results. The strategy not only benefits the soldier but can be used by the entire family. One section is dedicated to providing health tips for the entire family. Healthy lifestyles begin at home, carry over into the workplace and into military life. This strategy will benefit the three main areas our citizen soldier lives in. The purpose of this paper is to provide a strategy to Reserve Commanders in maintaining a healthy force in support of Joint Vision 2010/2020 through Force Health Protection life-cycle health maintenance program and the Department of Defense HOOAH4HEALTH promotion program.

HEALTH VISION

Joint Vision 2010 is the conceptual template for how we channel the vitality of our people and leverage technological opportunities to achieve new levels of effectiveness in joint warfighting. The vision of future warfighting develops four operational concepts: dominant maneuver, precision engagement, full dimensional protection, and focused logistics. These concepts incorporates America's core strengths of high quality people and information-age technological advances, builds on proven competencies, and focuses the development of future joint capabilities.² Joint Vision 2010 serves as basis for focusing the strengths of each individual service or component to exploit the full array of available capabilities to achieve full spectrum dominance. This will guide the evolution of joint doctrine, education, and training to achieve a seamless joint operation.³ From Joint Vision 2010 evolved the Force Health Protection Plan from the Joint Staff, J4, Logistics Directorate, Medical Readiness Division.

Force Health Protection (FHP) is a "total Life cycle" health support system paralleling the concept of focused logistics described in Joint Vision 2010, an integrated and focused approach to protect and sustain Department of Defense's (DoD) most important resource – its service members. Three interrelated pillars support FHP:

- Promoting and sustaining a healthy and fit force.
- Casualty prevention.
- Casualty care and management.⁴

Active and reserve components are being relied upon to support the increase numbers of deployments and in meeting the operational requirements, the fitness of our forces are more important than ever. FHP is designed to establish future benchmarks for the military health

CHALLENGES FOR ARMY RESERVE

The U.S. Army Reserve (USAR) has been committed to ensuring the Army succeeds in peace and war, at home and abroad for 92 years. The USAR goal has always focused on readiness, transformation, and people to remain relevant and ready. The USAR vision is as the essential provider for training and support operations, engaged worldwide, with ready units and soldiers. The Army Reserve has benefited the Army because of the application of civilian acquired skills, talents and experience. The first reservists were civilian doctors who could be called upon in time of emergency. Army reserve soldiers are learning from the civilian technological innovations in their civilian jobs and bringing them into the Army for its benefit. Our soldiers and our units are stationed in Hometown, U.S.A., with soldiers located in 1,100 Army Reserve Centers in towns and cities across America, putting the Army's footprint in every part of our country. As a community based force, the Army Reserve is America's people. They are the reflection of the values and traditions embodied in our culture. Currently, there are 205,742 Army Reservists which is 40% of the force; 57% are under thirty-five years old and 32% are Females.

The reserve force is challenged with maintaining the same mission ready requirements as their active duty counterpart. Active duty has 365 days to train and maintain, whereas, the reserve soldier trains one weekend a month and two weeks a year. This is not enough time to meet the mandated administrative requirements even with a small full-time support staff consisting of civilians and active reserve personnel to assist. Physical fitness testing, yearly required briefings, preparation for the next inspection, yearly training plans that change with every new requirement, field training exercises, partial deployments, and limited funding all challenge the commander to maintain cohesiveness and a trained ready force. All these challenges, to include the Army reserve's own institutional transformation of command and control structure, the readiness of the Army reserve is at the highest level ever, almost 85%. The Army Reserve has been called-up as much in the last ten years as they were in the first eighty years of existence.¹⁴

The military's strategy in shaping the global environment is by responding to contingencies wherever the nation's interest are at stake. The Reserve Component assets were to be utilized only in time of war, instead they are being used to provide specialized service and to augment the daily operations of the Active Duty forces. The reserve components are being called upon more frequently and for longer periods to participate in contingency operations around the world. The military goal of a "Total Force," where the reserve components are an integral part of America's defense strategy. The Gulf War helped to bring

The second study titled "Health Status of Military Women and Men in the Total Force" was conducted by the Research Triangle Institute for the United States Medical Research and Material Command in Fort Detrick, Maryland with published results in October 1999. The objectives for this study was to examine the health status of military women and men in medical history and nutritional status, mental health, reproductive health, lifestyle factors, occupational/environmental risks and stressors, and use of health services. The recommendations made to DoD based on their findings are:

- Educate importance of routine breast self-examinations.
- Encourage males to visit health care providers.
- Provide nutritional classes, especially for females.
- Provide cessation of smoking classes.
- Reduce alcohol use, especially among males and Active Duty personnel.
- Screen for depression for all personnel.
- Provide education abuse prevention, and encourage seeking counseling.
- Advise women to seek prenatal care.¹⁷

Joint Vision 2010 constantly stresses the importance of leadership and individual initiative. This is a challenge for today's leaders who were raised in an era of information scarcity leaving them to deal with today's world of information overload. Rapid advances in technology have further increased the generation gap between junior and senior officers. Micro management, zero-defects mentality prevents innovation from taking place among our troops.¹⁸ Looking to the future to address the health concerns of the next generation soldier and understanding the current health concerns will give us a snapshot of what to expect.

The true issue for adolescent health is unrecognized and unmet health needs rather than an absence of health concerns. There is an important fact of the critical significance of behaviors and lifestyles adopted in adolescence as determinants of adult illness and mortality. Health education programs that will encompass teaching about both the intermediate and the long-term health concerns that have such a high salience for all adolescence. The third study involves adolescent behaviors that have serious health damning adult outcomes. They include the following:

- Use of tobacco increases risk of cancers, lung diseases, and cardiac and vascular disorders.
- Use of alcohol and other drugs increases the risk of injury due to automobile and other accidents as well as intentional injury such as assault, homicide or suicide.

a part of every schools curriculum. They learned to work with others and were optimistic in their success often at the expense of their own marriage and family. Women entered the workforce and reinforced the independence characterized by boomers.²³ Boomers grew up in rebellion with the Vietnam War and demonstrations against society a common scene on television.

Generation X was born between 1960 and 1980. They are the products of single parent homes due to high divorce rate. They were called the latchkey children raised by MTV with little adult supervision. Xers relied on themselves and learned to seek out a circle of friends for relationships. They learned to mistrust authority as people and institutions let them down continuously throughout their developmental years. Generation X is college educated with physical education being eliminated from high school's curriculum. This generation is not as intense in working long hours to earn a living, but looks to balance family and work. Boomers motto was "work is life", whereas "get a Life" is the Xers.²⁴

HOOAH 4 HEALTH

In 1998, the U.S. Army Center for Health Promotion and Preventive Medicine (USACHPPM) was tasked by the U.S. Army Office of the Surgeon General to devise a health promotion partnership that allows individuals to assume the responsibility to explore options and take charge of their health and wellness. In 1999, HOOAH 4 HEALTH (H4H) was created complete with a web site sponsored by the U.S. Army Office of the Surgeon General, the U.S. Army Center for Health Promotion and Preventive Medicine, the Army National Guard, and the Army Reserve. This is designed to address the force health protection and readiness requirements of the Army, particularly its Reserve Component.²⁵

The H4H is based on an interactive web-site containing educational materials in the areas of physical, mental, spiritual, and environmental/occupational health, behavior change theory, and medical readiness. It is designed to promote its use outside of drill time, since drill weekends are consumed with other essential activities. Commanders can request CHPPM to provide outcome evaluation research on the collection of baseline health risk and health goals information. Correspondence course/retirement point credit is offered for several modules on the site. The site also contains a toolbox of materials for publicity, promotion, teaching classes, and preparing briefing materials for reserve units. The site became operational on 01 May 00 and has been promoted as a resource for the Joint Chief of Staff Force Health Protection awareness Program. The Office of the Surgeon General (OTSG), the Office of the Chief of Army Reserve (OCAR), and the Army National Guard Surgeon's Office are full partners with USACHPM in this program. ²⁶

must for commanders looking for solutions in this area of concern. Third: PREVENTION offers tips for self-examination, family wellness issues, and links to resources. Additional assistance includes:

- Women's health issues.
- Deploying women's health
- Men's guide to health tests.
- Facts about prostate health
- Men's health issues and prevention
- Child and adult immunizations.
- Dental disease prevention.
- Sexually transmitted diseases.
- Injury control and prevention
- Cancer early detection.

HOOAH 4 LIFE is the fourth section to provide health tips for the entire family. Children can access this site and interact with the multimedia games available. Current and sound advice is available to help parents deal with children's issues. This guidance assists the soldier to maintain their family's health as well as their own by setting a good example. Samples the site has to offer is:

- What You(th) should know about smoking.
- Peer Pressure.
- Parent's guide to drugs and alcohol.
- Working teens: Tips for parents.
- Internet safety.
- Family support groups.
- Puberty
- Children's food pyramid
- Make a difference: help prevent crime
- Eating disorders.³¹

RECOMMENDATIONS

The H4H promotion programs are an all-encompassing assist for the commander to treat the best-protected species and their family. It is highly recommended for all reserve commanders to take advantage of this web-site by encouraging their soldiers to utilize the support provided. CHPPM is available, on request, to provide to the commander overall health

the adoption of health-promoting behaviors. This is not an issue for the "Medics" it is personal responsibility for one's health by reducing poor lifestyle behaviors and habits.

Utilizing the technology available in the H4H web-site brings the learning adventure on the level of this generation. The twenty-first century leader will need to emphasize mission, teamwork, trust, and open communication in order to have a strong internal cohesive unit. If the unit is sick in any of these areas, it fails. A person not operating at their full capacity is the weak link in this chain and can easily result in mission failure. A proactive response to potential future failures is the key to success. The challenge continues for commanders to keep a steady course with transformation and training of individual and collective skills. A healthy individual is an asset to life, to the workforce and to the military.

WORD COUNT= 4881.

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 - ⁴ The Joint Staff. Force Health Protection, Washington, D.C.: Pentagon, (1999). I.
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 - ⁶ IBID. 5.
 - ⁷ IBID. 11.
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- ¹⁸ Center for Strategic and International Studies, <u>American Military Culture in the Twenty-First Century</u> Washington D.C. Center for Strategic and International Studies, 2000). 58.

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